



Account #: \_\_\_\_\_ Work Order #: \_\_\_\_\_

**City of Fayetteville**  
**Contract for Water/Sewer/Sanitation/Stormwater Service**  
**Residential Agreement**

**Today's Date:** \_\_\_\_\_ **Date of Start Service:** \_\_\_\_\_

**Provide the Name, SS# or EIN #, Driver's License # & D.O.B. for each person listed on the lease/purchase agreement. Use the back of this form for additional names, Social Security and Driver's License #s.**

<b>First Name</b>	<b>Middle Initial</b>	<b>Last Name</b>
<hr/>		
OR		
<b>SS# or EIN#</b>	<b>Driver's License #</b>	<b>D.O.B</b>
		<b>Phone # (Cell or Home)</b>
<hr/>		
<b>Email Address:</b> _____		

**Service Address:** \_\_\_\_\_  
Street Address City Zip

**Apartment/Unit Number:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_  
Street Address City State Zip  
*(if different from above service address)*

**Please check all applicable boxes**

- ☐ Have you or anyone on the lease/deed had Water/Sewage/Sanitation/Stormwater service in The City of Fayetteville?  
If YES, what was the service address? \_\_\_\_\_
- ☐ Do you **OWN/PURCHASING** your home? If YES, a copy of your Settlement Statement must be provided and two forms of ID.
- ☐ Are you a **MANAGEMENT** Company **RENTING** this home? If YES, a copy of the signed Lease Agreement must be provided and two forms of ID.
- ☐ Are you **RENTING/LEASING** your Home? If YES, a copy of the signed Lease Agreement must be provided and two forms of ID.
- ☐ For residence inside the City Limits of Fayetteville, Sanitation and Recycling are mandatory. The City sets up and discontinues service with Waste Industries for you (some apartments handle their own). So that the City can serve you better:  
Is there a garbage container at the above address: Yes \_\_\_\_ No \_\_\_\_ Is there a recycle bin at the above address: Yes \_\_\_\_ No \_\_\_\_

**Office Use ONLY**

<b>Process/Transfer Fee:</b> _____	<b>Date Paid:</b> _____	<b>Received By:</b> _____
<b>Work order Processed: Yes:</b> _____ <b>No:</b> _____	<b>By:</b> _____	<b>Date:</b> _____
<b>Sanitation order Processed: Yes:</b> _____ <b>No:</b> _____	<b>By:</b> _____	<b>Date:</b> _____

In consideration for receiving water, sewer, sanitation and stormwater from the City of Fayetteville, at the above location, I hereby acknowledge responsibility for payment of service billings. There is a non-refundable administrative fee along with a refundable deposit. Utility accounts are billed on a monthly basis and payment by the indicated due date is required to prevent interruption of service.

**Please initial the following statements indicating you have read and agree with each.**

**Billing**

\_\_\_\_\_ Bills are mailed monthly and failure to receive a bill does not relieve your obligation to pay. Customer Service Department must be contacted if you do not receive a bill in a timely manner.

**Disconnection for Non-payment**

\_\_\_\_\_ Service to any property may be disconnected at any time in which payment is past due.

\_\_\_\_\_ When water service is suspended for non-payment, returned check or other violations, a fifty dollar (\$50) Reconnect Fee and the outstanding balance must be paid to restore service. (Cash, Money Order, Credit Card only)

**Tampering with City Property**

\_\_\_\_\_ Tampering with City property is **PROHIBITED** and punishable by law.

\_\_\_\_\_ Once water service has been disconnected for ANY reason, service can only be restored by a City of Fayetteville Water Department employee. Customers and/or Landlords do not have the authorization to restore service. A one-hundred dollar (\$100) Locked Meter fee will be accessed for tampering with City of Fayetteville property. The tampering fee and the outstanding account balance must be paid before service will resume.

**Discontinuing Service**

\_\_\_\_\_ The account holder must submit in writing a Termination Form.

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To aid the City of Fayetteville Water Department in the review and acceptance of the Contract of Service Application, Applicant unconditionally agrees to comply with all applicable Ordinances, rules and regulations currently in force and any that may be later amended, and to promptly pay for all services provided. This includes all service billings, late fees, and other fees and charges as they may apply.

Name \_\_\_\_\_  
Print

\_\_\_\_\_  
Signature

Date \_\_\_\_\_

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